

## PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence, including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below. A corrected otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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29177 7590 06/10/2005

BELL, BOYD & LLOYD, LLC  
 P. O. BOX 1135  
 CHICAGO, IL 60690-1135

09/01/2005 WABDEL3 00000063 10031564

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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

<b>Heather Foster</b>	(Depositor's name)
<i>[Signature]</i>	(Signature)
<b>August 25, 2005</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/031,564	01/22/2002	Wen Xu	112740-520	6863

TITLE OF INVENTION: METHOD OF PROVIDING ERROR PROTECTION FOR A DATA BIT FLOW

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	09/12/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
DILDINE JR, R STEPHEN	2133	714-752000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Bell Boyd & Lloyd LLC**

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Siemens Aktiengesellschaft****Munich, Germany**Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 2

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-1818 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

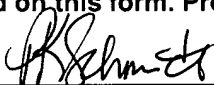

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature \_\_\_\_\_

Date **August 25, 2005**Typed or printed name **Patricia Kane Schmidt**Registration No. **46,446**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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<b>TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)</b> (37 C.F.R. 1.311)				Docket No. 112740-520	
Applicant(s): Xu Wen					
Application No. 10/031,564	Filing Date January 22, 2002	Examiner Stephen R. Dildine, Jr.	Customer No. 29177	Group Art Unit 2133	Confirmation No. 6863
Invention: <b>METHOD OF PROVIDING ERROR PROTECTION FOR A DATA BIT FLOW</b>					
<b>Mail Stop Issue Fee</b> <b>COMMISSIONER FOR PATENTS</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>					
Transmitted herewith are the following for the above-identified application.					
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85					
<input checked="" type="checkbox"/> Utility Fee: <u>\$ 1400.00</u> <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____					
<input type="checkbox"/> Publication Fee: _____					
<input checked="" type="checkbox"/> A check in the amount of <u>\$1,406.00</u> is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-1818</u> as described below.					
<input type="checkbox"/> Charge the amount of _____					
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<input checked="" type="checkbox"/> Charge any additional fee required.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>					
1  <i>Signature</i>			Dated: <b>August 25, 2005</b>		
Patricia Kane Schmidt (Reg. No. 46,446) Customer No.: 29177 312-807-4363					
CC:					
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I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States and Trademark Office (Fax No. _____) on _____ _____ (Date)			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <u>August 25, 2005</u> _____ (Date)		
_____ Signature			 Signature of Person Mailing Correspondence		
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